

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other					
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge						
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

Work Order ID 89574

89574

Page 2

August-24-12 10:15:41 AM

Item ID: D4640-15 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Ceiling Protector
 Start Date: 8/24/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 9/24/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC8- Inspect parts - second check Memo	0.00 <i>5 hrs 12.9.18</i> 0.00				<u>1</u>			
130 *130* Packaging Packaging	Identify as per dwg & Stock Location: _____ Memo <i>DD 89595</i>	0.00 0.00				<u>D</u>		<u>12/9/24</u>	
140 *140* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00						<u>12/9/24</u>	<i>mf 12-09-24 EN12652</i>

POSITIVE RECALL

EFFECTIVE

AUTH

RELEASED

DATE

*12/9/18
EN12652*

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Picklist Print

August-24-12 10:15:41 AM

Page 1

Work Order ID: 89574

Parent Item: D4640-15

Parent Item Name: Ceiling Protector

Start Date: 8/24/12

Required Date: 9/24/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 12.05.08 NEW ISSUE DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.093-F6006-07 GE PLASTICS LEXAN SHEET		Purchased	No			100	sf	1,452.6700	12.6	13.263158			

B12-9-18

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
therm	1452.67	
112176	40.44	
114459	1412.23	

114459
114459

(1)

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Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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DART AEROSPACE LTD		Work Order: 81574
Description: CEILING PROTECTOR		Part Number: 4640-C
Inspection Dwg: D4640-15, Rev: B		Page 1 of 3

FIRST ARTICLE INSPECTION CHECKLIST

☒ First Article ☒ Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
18.80	± .02	18.80	✓		T	1301
22.03	± .02	22.03	✓		T	
20.06	± .02	20.06	✓		T	
13.06	± .02	13.06	✓		T	
3.60	± .02	3.60	✓		T	
8.09	± .02	8.09	✓		T	
20.86	± .02	20.86	✓		T	
3.11	± .02	3.11	✓		T	
7.27	± .02	7.27	✓		T	
5.10	± .02	5.10	✓		T	
4.85	± .02	4.85	✓		T	
13.06	± .02	13.06	✓		T	
1.50	± .02	1.504	✓		V	1302
5.06	± .02	5.00	✓		T	
57.46	± .02	57.46	✓		T	
82.37	± .02	82.37	✓		T	
8.13	± .02	8.132	✓		Prow	1302
6.77	± .02	6.77	✓		T	
5.72	± .02	5.72	✓		T	
6.13	± .02	6.13	✓		T	
2.21	± .02	2.21	✓		T	
.88	± .02	.883	✓		V	
7.78	± .02	7.78	✓		T	

Measured by: AB	Audited by: Smb	Prototype Approval:
Date: 12-9-18	Date: 12-9-18	Date:

Rev	Date	Change	Revised by	Approved
A		New Issue	KJ/JLM	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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DART AEROSPACE LTD		Work Order:	89574
Description: CEILING PROTECTOR		Part Number:	D4640-13
Inspection Dwg: D4640-15 Rev: B		Page: 1 of 1	

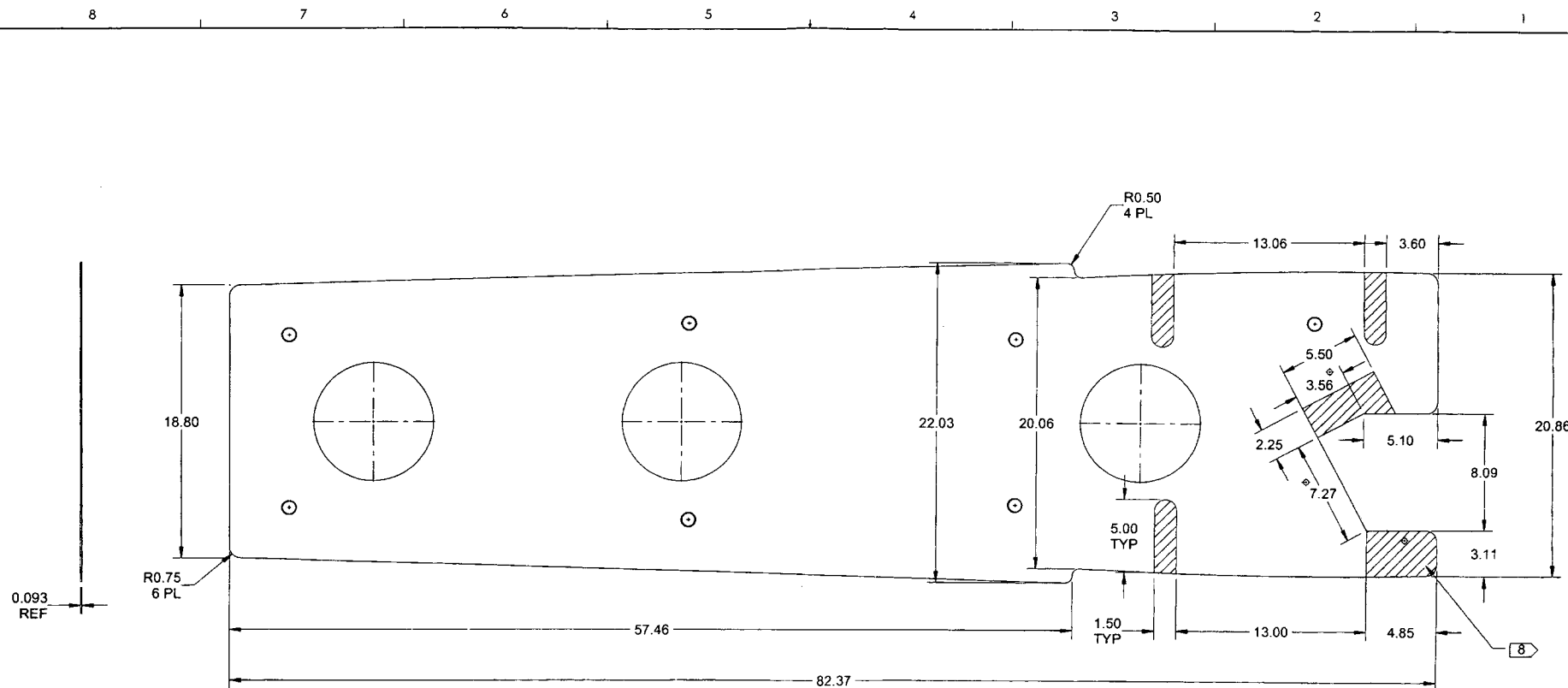
FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
7.47	$\pm .030$	7.47	✓		T BC1	
Ø .375	$\pm .006 - .001$.377	✓		V BC2	
9.73	$\pm .030$	9.73	✓		T	
21.00	$\pm .030$	21.00	✓		T	
31.28	$\pm .030$	31.28	✓		T	
4.06	$\pm .030$	4.06	✓		T	
27.23	$\pm .030$	27.23	✓		T	
22.28	$\pm .030$	22.28	✓		T	
20.32	$\pm .030$	20.32	✓		T	
.093	$\pm .010$.094	✓		V	

Measured by: B	Audited by: Smb	Preliminary Approval:
Date: 12-9-18	Date: 12-9-18	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

10.04.15



D4640-15 CEILING PROTECTOR
TEXTURED SIDE SHOWN

RELEASED
2012-09-12
MP

NOTES:

- 1) MATERIAL: F6006-GY5B133 GRAY LEXAN SHEET (SUEDE/POLISHED) 0.093 THICK B
REF DART SPEC MLEXXS.093-F6006-07
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1 ON SMOOTH SIDE
- 7) WEIGHT: 5.99 lbs (TRIMMED WEIGHT = 5.78 lbs)
- 8) REMOVE SHADED AREA AND ADD HOLES IF CUSTOMER REQUESTS "TRIMMED KIT" ON PURCHASE ORDER

ufo 8/15/11

DESIGN	XDF	DART AEROSPACE LTD	
DRAWN	PC	HAWKESBURY, ONTARIO, CANADA	
CHECKED	BE	DRAWING NO.	REV. B
MFG. APPR.	BE	D4640	SHEET 8 OF 9
APPROVED	MP	TITLE	SCALE
DE APPR.	TH	BAGGAGE PROTECTOR	NTS
DATE	12.07.19	COPYRIGHT © 2012 BY DART AEROSPACE LTD	
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

NCR: Yes / No

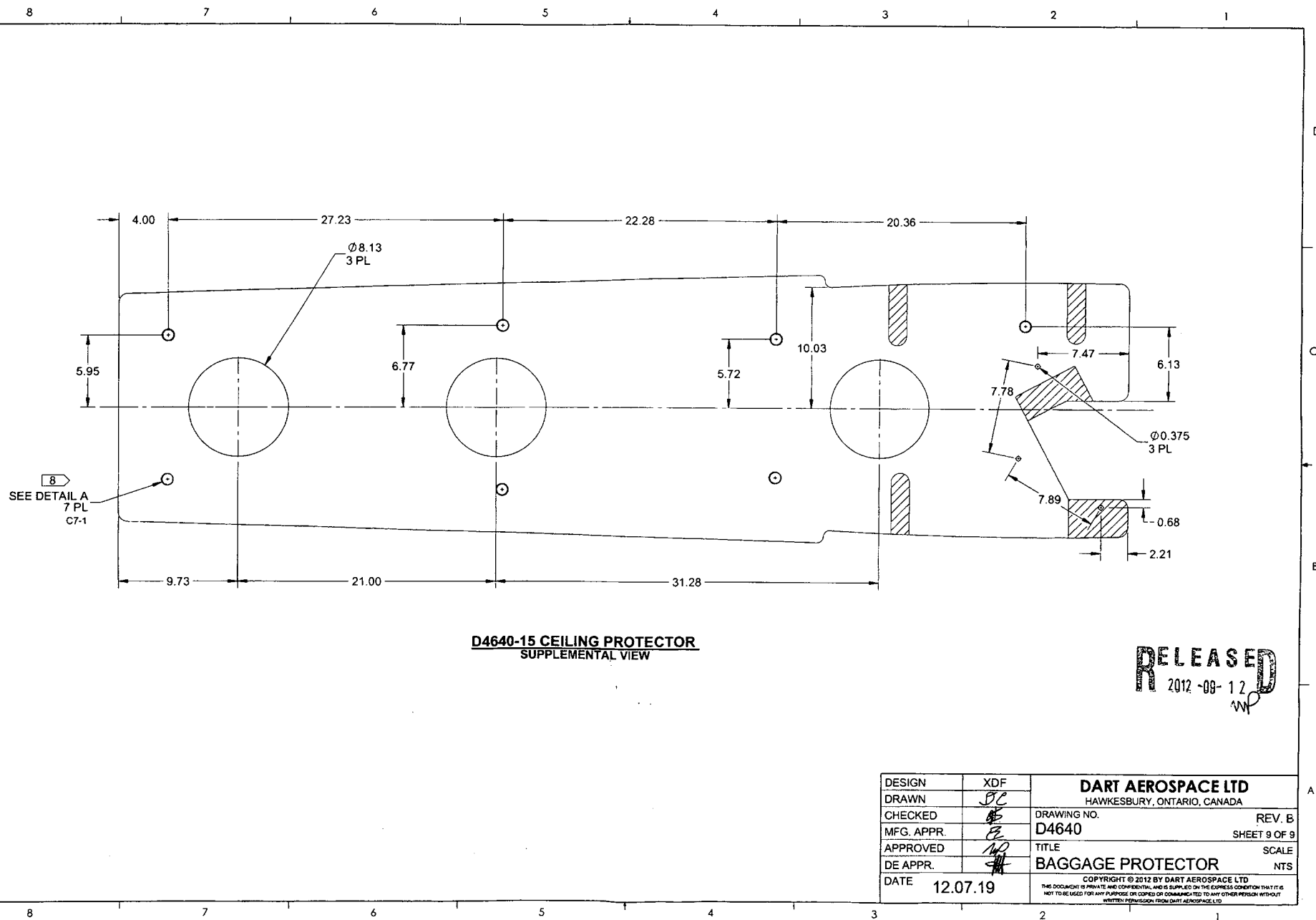
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Unapproved <input type="checkbox"/>																											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



D4640-15 CEILING PROTECTOR
SUPPLEMENTAL VIEW

RELEASED
2012-09-12
WJ

DESIGN	XDF	DART AEROSPACE LTD	
DRAWN	BC	HAWKESBURY, ONTARIO, CANADA	
CHECKED	BE	DRAWING NO.	REV. B
MFG. APPR.	BE	D4640	SHEET 9 OF 9
APPROVED	WJ	TITLE	SCALE
DE APPR.	WJ	BAGGAGE PROTECTOR	NTS
DATE	12.07.19	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED BY THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small>	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Receiving Report

Date: 10/4/21

Batch No: 2119459

Supplier: SABIC

Dart P/O: 11420

Packing Slip: Yes ☒ No ☐
 Invoice: Yes ☐ No ☒
 Receipt: Cash ☐ Cr ☒

Release Note Attached: Yes ☒ No ☐ N/A ☐
 Waybill Attached: Yes ☒ No ☐ N/A ☐
 Shipment Complete: Yes ☒ No ☐ N/A ☐
 QC6 Inspection ☒ N/A ☐
 Work Order 62412 N/A ☒

Discrepancies

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments

Initials of receiver (if shipment OK) Level 12 LU

Production/Admin: 10/4/21
 Date
 Received/Costing
 Initial

Location

SABIC Polymershapes

سابك
sabic

INVOICE NO.	O090639/M
INVOICE DATE	20.04.10
TAKEN BY	caldwellj
G.S.T. REG. NO.	856372750RT0001
CARRIER	

INVOICE

PST 85637 2750 TR000

SOLD TO: DART AEROSPACE LTD

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
Canada

1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
Canada

A/C 22.28

CUSTOMER DARAER	SHIP VIA EPIC	TAX LIC 1 CHARGE GST	TAX LIC 2 6112-5207	INVOICE TERMS NET 30 DAYS	SALES ORDER O90164	PAGE 1	WHS. 99
CUSTOMER P.O. 11420	SHIP DATE 20.04.10	FREIGHT TERMS PREPAID + CHARGE	SALES REP. WADE DIXON	S.D.N. 01	BILL OF LADING	Sch. Date 20.04.10	Sales Office 99

LN	PRODUCT	ORDER	B/O	SHIP	SKU	DESCRIPTION	PRICE	PER	EXTENSION
001	41202630	61	0	61	SHT	F6006-GY5B133 GREY .093 X 52 X 96	1 217.95	SHT	13294.95
002	0000005	1	0	1	EA	THANK YOU FOR SELECTING SABIC POLYMERSHAPES FREIGHT GST PAYABLE @ 5%	1 .00	EA	0.00
						PLEASE PAY THIS AMOUNT			125.00 671.00 ----- 14090.95 =====
***** *** IF YOU ARE NOT CURRENTLY RECEIVING OUR INVOICES *** *** VIA EMAIL OR FAX, PLEASE SUPPLY US WITH AN EMAIL *** *** ADDRESS OR FAX NUMBER . FAX TO 905-789-3161 *** ***** *									

RECEIVED APR 23 2010

PLEASE Remit To: SABIC Polymershapes 9150 Airport Road Brampton ON L6S 6G1
Phn : (613)745-7043 Fax : (613)745-4291

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM US. ALL DISCREPANCIES MUST BE REPORTED WITHIN 3 DAYS.

Purchase Order Receipt Listing

April 21, 2010 1:17:20 PM

Page 1 of 1

All amounts are calculated in domestic currency.

All Vendors PO ID PO11420 Receipt Dates from 4/21/2010 to 4/21/2010 All Line Item Types
All Item ID/GI/WOs All Rec Employees All Companies

All Item ID/GL/WOs All Rec. Employees All Currencies

Grouped by Vendor ID

[illegible]

*** SHIPPER ***

SABIC Polymer Shapes
1250 Old Innes Rd., Unit 519

A/C 10.18

Ottawa, Ontario K1E 5L5

Page 1

PST 95637 2150 TR0001

PHONE: (613)745-7043 FAX: (613)745-4291

SOLD TO: DART AEROSPACE LTD

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
Canada

1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
Canada

Our Order No	Customer	GST License	PST License	Invoice Terms	Ordered	Shipped	Taken By	RDP
090164	DARAR	CHRCZ GST	6112-5207	NET 30 DAYS	24.02.10		caldwell	26.04.10
Ship. Doc. No	Salesrep	Customer P.O.#	Shipped Via	F.O.B.	Freight Terms	Inv. No.	Ship Date	
C1	93	11420	BPIC		PREPAID + CHARGE		26.04.10	
Ln# Location	Ord	B/C	Ship Sku	Product Code	Description	U/Price		

DELIVERIES TO BE DONE BEFORE
4:00 PM . ADVISE SHIPPING CO.

001 56 56 0-SHT 41202630

F6906-GY5B133 GRBY
.093 X 52 X 96

002 1 0 1 BA 0000005

THANK YOU FOR SELECTING
SABIC POLYMER SHAPES

11/10/91

105365

LINE NO.	RECEIVING NO.	PICKED BY	DATE	SHIPPED BY	DATE	VERIFIED	DATE

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM SABIC. ALL DISCREPANCIES MUST BE REPORTED WITHIN 10 DAYS.
ALL RETURNS MUST HAVE VALID RETURNED GOODS AUTHORIZATION NUMBER CLEARLY MARKED ON ALL PACKAGES.

SABIC
Innovative
Plastics

سابك
sabic

SABIC Polymershapes

1250 OLD INNES RD. 519 OTTAWA, ONT. K1B 5L3
TEL: 613 745 7043 FAX: 613 745 8163

CERTIFICATE OF COMPLIANCE

SOLD TO: DART AEROSPACE

DATE: 2/25/2010

YOUR PURCHASE ORDER 11420

OUR SHIPPER NO: 090164

LINE ITEM #: 1

QUANTITY: 56 SHEETS

DESCRIPTION: 093 X 52 X 96 LEXAN F6006-GY5B133 GREY

THESE PARTS WERE MANUFACTURED IN ACCORDANCE WITH: FAR 25.853

THIS IS TO CERTIFY THAT THE MATERIAL FINISHES AND FUNCTIONAL REQUIREMENTS OF THE ABOVE LISTED PARTS ARE IN ACCORDANCE WITH THE REFERENCE PROCUREMENT SPECIFICATIONS, CONTROL DRAWINGS OR PARTS DESIGNATION AND LATEST REVISIONS AS REFERENCED ON THE SUBJECT PURCHASE ORDER.

AUTHORIZED REPRESENTATIVE SIGNATURE

Jon Caldwell

JON CALDWELL
BRANCH MANAGER

SABIC Polymershapes

سابك
SABIC

ORDER CONFIRMATION

ORDER	090164
Date	24.02.10
GST Registration #	856372750RT0001
Taken By:	caldwellj

Sold To

DART AEROSPACE LTD

1270 ABERDEEN STREET
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD

1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
Canada

A/C

Customer DARAER	Ship Via EPIC	TAX LIC 1 CHARGE GST	TAX LIC 2 6112-5207	A/R Terms NET 30 DAYS	F. O. B.	Page 1
P. O. # 11420	Expiry Date 24.02.12	Freight Terms PREPAID + CHARGE	Sales Representative 93	Sched Ship 26.04.10	Dept.	
Product	Quantity	SKU	Description	Price	Per	Extension
41202630	56	SHT	F6006-GY5B133 GREY .093 X 52 X 96	217.95	SHT	12205.20
0000005	1	EA	THANK YOU FOR SELECTING SABIC POLYMERSHAPES	.00	EA	0.00
* ORDER CONFIRMATION * Total						12205.20 =====
<p>This is to verify receipt of the above-referenced order. Upon acceptance of the order, SABIC Polymershapes will fill the order on its standard terms and conditions of sale unless, prior to shipment of all or part of this order, you provide written objections to such standard terms and conditions of sale or unless other terms have been agreed to in writing signed by SABIC Polymershapes.</p>						
31.12.20						
SABIC Polymershapes 1250 Old Innes Rd., Unit 519 Ottawa, Ontario K1B 5L3 PST 85637 2750 TR0001 Phn : (613)745-7043 Fax : (613)745-4291						



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PO REPRINT

Purchase Order ID PO11420

Purchase Order Date 2/24/10

PO Print Date 2/25/10

Page Number 1 of 1

Order From :

VC-GEP001

SABIC POLYMERSHAPES
9150 AIRPORT ROAD
BRAMPTON, ON L6S 6G1
CA

Contact Name

Vendor Phone

800 267 1575

Vendor Fax

613 745 4291

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOE

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req. Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MLEXS.093-F6006-07	GE PLASTICS LEXAN SHEET	4/26/10 Yes	<i>2114.666</i> 1,941.33 sf	Purolator ground	\$6.2870	\$12,205.14
<i>acc'd 2114.6666</i> <i>10/14/10</i> PO Total:							\$12,205.14

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required when applicable

Change Nbr: 3

Change Date: 2/25/10